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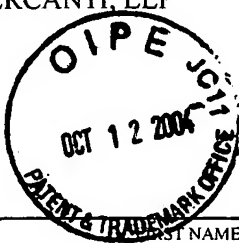
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20311 7590 07/29/2004

**MUSERLIAN AND LUCAS AND MERCANTI, LLP
475 PARK AVENUE SOUTH
NEW YORK, NY 10016**

10/15/2004 FMETEK12 00000097 10606490

01 FC:1501 1370.00 OP
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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	INVENTOR NAMED FIRST	ATTORNEY DOCKET NO.	CONTINUATION NO.
10/606,490	06/26/2003	Wataru Satake	KON-1803	5669

TITLE OF INVENTION: CONCENTRATED COLOR DEVELOPER COMPOSITION USED FOR SILVER HALIDE PHOTOGRAPHIC SENSITIZED MATERIAL AND PROCESSING METHOD BY USE THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	10/29/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LE, HOA VAN	1752	430-466000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Muserlian, Lucas
and Mercanti**

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Konica Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Japan

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized to charge the enclosed fee(s), or credit any overpayment, to Deposit Account Number **02-2275** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)

(Date)

Donald C. Lucas Oct. 12, 2004

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